

Division of Laboratory Services 630 Hart Lane Nashville, TN 37216 615-262-6300

https://www.tn.gov/health/health-program-areas/lab.html

Disease/Agent Suspected or Test Requested:

Coxiella burnetii

| Provider Requirements | Contact Bioterrorism laboratory before submission. |
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| Acceptable Specimen Sources/Type(s) for Submission | Whole blood |
| TDH Requisition Form Number | PH-4263 - Contact Bioterrorism laboratory before submission. |
| Media Requirements | Contact Bioterrorism laboratory before submission. |
| Special Instructions | |
| Shipping Instructions | Contact Bioterrorism laboratory prior to shipment. |
| Laboratory Section Performing Testing | Bioterrorism |
| Lab Location(s) Performing Test | Nashville; Knoxville |

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).